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INFORMATIONAL NOTICE

DATE: December 21, 2006

TO: Participating Hospitals: Chief Executive Officers, Chief Financial Officers, and Patient Accounts Managers; and Renal Dialysis Facilities

RE: Epogen Billing Changes for Renal Dialysis Claims

This notice identifies changes to Epoetin Alfa (Epogen) billing for patients covered under the department's medical programs. It applies to outpatient renal dialysis claims only (category of service 25). These department changes do not impact the State Renal Program.

A new HCPCS code, **Q4081 – Injection, Epoetin Alfa 100 units**, has been established for end-stage renal dialysis patients, effective with dates of service on or after January 1, 2007. For claims with a "From Date" of January 1, 2007, and after, this new HCPCS code must be present with each revenue code 634 (EPO Less than 10,000 Units) and 635 (EPO 10,000 or More Units) on the claim, or the claim will be rejected with a new error code H11 – Appropriate EPO HCPCS Required.

Providers still must identify Value Code 68, and the associated number of units of Epogen given during the billing period.

HCPCS code Q4081 will be reimbursed at \$1.56 per 100 units and will be included in the next update to the Physician Fee Schedule. The fee schedule is on the department's Web site at: <http://www.hfs.illinois.gov/reimbursement/>. Any subsequent changes in reimbursement will be reflected on the fee schedule.

Providers wishing to receive e-mail notification, when new provider information has been posted by the department, may register at the following HFS Web site:

<http://www.hfs.illinois.gov/provrel>

Electronic claim submission via the Internet is available by registering on the department's Medical Electronic Data Interchange, Internet Electronic Claims (MEDI/IEC) System at:

<http://www.myhfs.illinois.gov/>. The MEDI/IEC System is available to enrolled providers and their authorized staff, claim submitting agents and payees. During the registration process, you will be given access to specific claim formats based upon your enrollment status with the department.

Any questions regarding this notice may be directed to the Bureau of Comprehensive Health Services at 1-877-782-5565.



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Administrator
Division of Medical Programs